ESSENTIAL JOB FUNCTIONS FOR DISPATCH

- Must be 18 years of age
- Must have a high school diploma or G.E.D.
- Must be a U.S. Citizen
- Must have basic computer skills
- Must have a valid S.C. driver's license
- Must not have a disqualifying incident on driving record such as driving under the influence of alcohol or dangerous drugs, reckless homicide, involuntary manslaughter or leaving the scene of an accident, etc.
- Must be able to maintain focus and mental preparedness of shifts of 12-14 hours
- Must be able to see well in a low light environment
- Must be able to pass a drug test
- Must be able to pass a polygraph exam
- Must be able to pass a psychological test to establish suitability for the demands and stresses of law enforcement employment
- Must have a satisfactory credit history
- Must be of good moral character as determined by a background investigation
- Must have good communication skills
- Must have no convictions for crimes of moral turpitude as defined by law

APPLICANT INFORMATION: (To be returned with completed application) Certain information is required to verify the applicant's identify. The West Columbia Police Department does not discriminate due to age, sex, race, religion, disability or ethnicity.

Applicant's Full Name:		
Street Address:		
City:	State:	Zip Code:
Home telephone:		
Cellular telephone:		
Work telephone:		
Date of Birth:		
Place of Birth:		
Eyes:		
Hair:		
Height:		
Weight:		
Scars/Tattoos/Other distinguishing n	narks:	
U.S. Citizen:	Yes	No
Driver's License Number:		
State of Issue:	Expiration Date:	
Are you legally entitled to work in the	e United States?	
Do you have a high school diploma	or GED?	
Will you take a polygraph examinati	on?	
Have you taken a polygraph exam w If yes, give date and location of poly	•	,

Will you submit to psychological tests and interviews?

Will you submit to a drug test?

Will you submit to a medical examination to determine physical ability to perform the essential job functions of a police officer?

Have you ever attended <u>or</u> completed a certified police training academy? If yes, give date and location of academy:

Are you currently certified as a law enforcement officer in S.C.?

Are you currently certified as a law enforcement officer in any state? If yes, list state:

Will you allow the West Columbia Police Department full and unrestricted access to all personnel, internal affairs, and disciplinary files from your previous employers?

Within the past five (5) years, have you been convicted of driving with your license suspended, revoked or denied? If yes, give date and location:

Have you been convicted, pled guilty, or no contest to driving under the influence of alcohol, drugs or both in any state? If yes, list date and location:

Have you ever been convicted, pled guilty or no contest to a felony? If yes, list date, location and offense:

Have you ever been convicted, pled guilty or no contest to a crime of moral turpitude? If yes, list date, location and offense:

Have you ever been convicted, pled guilty or no contest to a crime involving a sex offense?

If yes, list date, location and offense:

Have you ever been convicted, pled guilty or no contest to a crime involving domestic violence?

If yes, list date, location and offense:

Have you ever been the subject to an order of protection or a restraining order? If yes, list date and location:

Have you ever engaged in the illegal use of any controlled substances including steroids? If yes, list date and substance:

Have you ever engaged in the illegal possession, sale or distribution of any controlled substance including steroids? If yes, list date and substance:

PERSONAL HISTORY: (Residency)

List all residences and dates for the last 10 years. (Attach additional sheets if needed)

1.	Street Address:		
	City:	State:	Zip Code
	Dates: From	to	
	Rented:	Owned:	
	Landlord's Name:		
	Landlord's Address:		
	Landlord's Telephone:		
2.	Street Address:		
	City:	State:	Zip Code
	Dates: From	to	
	Rented:	Owned:	
	Landlord's Name:		
	Landlord's Address:		
	Landlord's Telephone:		
3.	Street Address:		
	City:	State:	Zip Code
	Dates: From	to	
	Rented:	Owned:	
	Landlord's Name:		
	Landlord's Address:		
	Landlord's Telephone:		

4.	Street Address:		
	City:	State:	Zip Code
	Dates: From	to	
	Rented:	Owned:	
	Landlord's Name:		
	Landlord's Address:		
	Landlord's Telephone:		
5.	Street Address:		
	City:	State:	Zip Code
	Dates: From	to	
	Rented:	Owned:	
	Landlord's Name:		
	Landlord's Address:		
	Landlord's Telephone:		
6.	Street Address:		
	City:	State:	Zip Code
	Dates: From	to	
	Rented:	Owned:	
	Landlord's Name:		
	Landlord's Address:		
	Landlord's Telephone:		

Marital History:			
Marital Status:	Single Separated	I	Married Divorced
List any other names y names that have been of		_	en names, nicknames, aliases, and
If married, list spouse'	s complete name incl	uding ma	niden name:
Spouse's Date of Birth	ı:		
Spouse's Occupation:			
Spouse's Place of Bus	iness:		
Address of Business:			
Spouse's Employer's I	Phone Number:		
If divorced, list former subsequent names:	spouse's complete na	ame inclu	uding maiden name and any
Former spouse's Date	of Birth:		
Former spouse's addre	ess:		
Former spouse's telepl	none number:		
Date of Divorce:			
Location of Divorce: (Town, County, and S	tate)	
If you have divorced a decree.	t any time, and remar	ried, plea	ase provide a copy of the divorce

Financial History:
Do you have any source of income other than your salary?
If yes, list source:
Have you had any checks returned due to insufficient funds?
If yes, explain:
Do you have any other loans/debts other than your rent or home mortgage?
If yes, give details:
Have you had any garnishment of wages or judgements pending against you?
If yes, explain:
Have you defaulted on any loans including student loans?
If yes, explain:
Have you ever filed for bankruptcy?
If yes, explain:
How would you categorize your credit rating?
Excellent Good Average Poor
What is your total annual income from all sources?
What is the amount of your total indebtedness?

Driving History: Do you have a current valid S.C. Driver's license? Date of issue: **Restrictions:** Have you ever been issued a driver's license by any state other than the state of S.C.? If yes, list: Driver's license number: State of issue: Dates of license: Name under which license was issued: Driver's license number: State of issue: Dates of license: Name under which license was issued: Driver's license number: State of issue: Dates of license: Name under which license was issued: Driver's license number: State of issue: Dates of license: Name under which license was issued: Have you ever been refused a driver's license? If yes, list state, when and why: Has your license ever been suspended or revoked?

Have you been involved in a motor vehicle accident within the last 5 years as a driver? If yes, where you found to be at fault?

List dates of accidents, and jurisdiction/location:

If yes, list state, when and why:

If yes, was license restored and when:

Have you had any moving traffic citations within the last 5 years? If yes, list violation, date, and jurisdiction/location:

Military History	7 :			
Are you currently If yes, what branch Enlistment date: Rank at entry: Current rank: Describe your du	ch:	er of the military se	rvice?	
Have you ever be If yes, what brane Enlistment date: Discharge date: Rank at entry: Rank at discharg Type of discharg Describe your du	ch: e: e:	ne military service?		
Were you subject to any demotion or disciplinary action while in the military service? If yes, explain:				
List any awards,	medals, or comme	endations received:		
	<u>M</u>	ILITARY SERVI	<u>CE</u>	
	egistered with the	Selective Service? Where?	YESNO	If " YES "
relevant inf	ormation pertaining	other military acqu ng to your backgrou o provide accurate	and. Please list tho	se individuals
NAME	ADDRESS	TELEPHONE	MILITARY UNIT	DATES

References:

List five individual references, personal or professional, who have knowledge of you and your qualifications:

· 1
Name: Relationship: Address: Telephone numbers: Length of time known:
Name: Relationship: Address: Telephone numbers: Length of time known:
Name: Relationship: Address: Telephone numbers: Length of time known:
Name: Relationship: Address: Telephone numbers: Length of time known:
Name: Relationship: Address: Telephone numbers: Length of time known:

References (Continued):

During the course of the background investigation, persons who know you will be asked to comment upon your suitability for the position for which you have applied. Inquiries will be confined to job relevant matters.

Please supply the appropriate information in the spaces below. If a category is not applicable, write "N/A".

Name of your father: Address: Telephone numbers:
Name of your mother: Address: Telephone numbers:
Name of your father-in-law: Address: Telephone numbers:
Name of your mother-in-law: Address: Telephone numbers:
Name of your spouse: Address: Telephone numbers:
Name of your former spouse(s):
Address:
Telephone numbers:
Name of your brother(s):
Address:
Telephone numbers:
Name of your sister(s):
Address:
Telephone numbers:

Name of your stepfather: Address:
Telephone numbers:
Name of your stepmother: Address: Telephone numbers:
rerephone numbers.
Names of your step-brother(s):
Addresses:
Telephone numbers:
Names of your step-sister(s):
Addresses:
Telephone numbers:
List all offspring: (please indicate "son" or "daughter". List current ages, addresses and telephone numbers.)
Neighbors: (list three neighbors who know you well enough to discuss your suitability for the position)
Name: Address: Telephone numbers:
Name: Address: Telephone numbers:
Name: Address: Telephone numbers:

Education:

South Carolina law requires law enforcement officers to possess a high school diploma or GED. Please indicate your current status with regard to this requirement by checking the appropriate space:
I possess a high school diploma.
I possess a G.E.D. (General Educational Development test).
I possess a college degree from an accredited university.
List all schools you have attended, beginning with high school. During the background investigation, persons you have known in a learning environment may be contacted. A review of your school/educational records may be made in conjunction with those contacts.
Name of school: Address: City and State: Dates of attendance: Teacher or reference:
Name of school: Address: City and State: Dates of attendance: Teacher or reference:
Name of school: Address: City and State: Dates of attendance: Teacher or reference:
Name of school: Address: City and State: Dates of attendance: Teacher or reference:
Have you ever been suspended or expelled form any high school or post-secondary school? (Post-secondary schools include colleges, universities, graduate schools, business or vocational schools, technical schools or any formal education beyond the high school level) If yes, explain:

Experience and Employment:

Beginning with your most current employment, list all jobs you have held in the past ten years. Include all part-time, temporary, and volunteer work. Please list all periods of employment and unemployment in chronological order. Use the spaces provided for you between employment listings to record periods of unemployment. Should you need to list additional experience/employment information, use an additional sheet of paper and continue in the EXACT format as listed below.

EXPERIENCE AND EMPLOYMENT

		Telephone:
Dates of employment: From		To:-
Dates of employment: From Full Time Part Time	Voluntary	Military Service
Title or Duties:		
Name you were known by:		
Name of Supervisor:		
Names of Co-Workers: (1)		
(2)		
(3)		
Reason for Leaving:		
UNEMPLOYED FROM	TO	
Dates of employment: From: Full Time Part Time Title or Duties: Names you were known by: Name of Supervisor: Names of co-workers: (1) (2)	Voluntary	Telephone: To: Military Service

			Military Service
Title or Duties:_			
Name you were l	known by:		
Name of Supervi	isor:		
Names of Co-Wo	orkers: (1)		
	(2)		
Reason for Leavi	ing:		
UNEMPLOYED F	ROM	ТО	
Name & Address of	Employer:		
			Telephone:
Dates of employ	ment: From:		To:
			Military Service
Title or Duties:_			
Names you were	known by:		
Names of co-wor	rkers: (1)		
	(2)		
	(3)		
Reason for Leavi	ing:		
UNEMPLOYED F	ROM_	TO_	
Name and address of	f amployer:		
ivaille allu address of	employer		
			Telephone
Dates of employs	ment: From		To:
1 2			Military Service
Name von were 1	knoven by:		
Name of Supervi			
maines of Co-W			
	(2)		
D C I	(3)		
keason for Leavi	ıng:		
UNEMPLOYED F	ROM	TO_	

the background investigation? YES NO If "yes", when should such contact be made?
If you have had no prior employment, please explain:
Have you ever been fired or asked to resign from any place of employment? YES NO If "yes", please give details to include when, name or employer and why?
Have you ever applied, successfully or unsuccessfully, for another position with any law enforcement agency? YES NO If "yes", please provide the year, agency, and check off the processes that you completed, and whether you were disqualified or hired. (If additional sheets are needed, attach using same format as below)
Year: Agency: Written test: Physical Agility test: Oral interview: Background investigation: Polygraph: Psychological exam: Medical exam: Drug screen: Disqualified: Hired:
Year: Agency: Written test: Physical Agility test: Oral interview: Background investigation: Polygraph: Psychological exam: Medical exam: Drug screen: Disqualified: Hired:

FINANCIAL

The management of personal finances is relevant to an individual's qualifications for a position with a law enforcement agency. Therefore, please fill in the financial statement that follows. The amount of indebtedness, in itself, will not be used in evaluating your qualifications. The behavior exhibited in meeting your financial obligation will be reviewed. A credit-reporting agency will be contacted for a report of your credit history.

CURRENT MONTHLY INCOME	CURRENT MONTHLY EXPENDITURES
Monthly salary	Mortgage payment (s)
Spouse's salary	Rent
Other monthly income	Other monthly payments
	Estimate monthly cost of living
	(include utilities, food, gasoline,
	home & car maintenance, etc.)
	and any other obligations.
Total Monthly Income	Total Monthly Expenditures

CURRENT ASSETS	CURRENT LIABILITIES	
Savings	Mortgages	
Checking balance	Automobile loans	
Real Estate (appraised or assessed value)	Charge accounts (total)	
Stocks and Bonds	Other liabilities (describe):	
Life insurance (cash value)		
Automobiles		
Other assets (describe):		
Total Assets	Total Liabilities	

Please supply the following information regarding financial institutions that you have accounts or loans with:

Institution (Bank, S&L,	Account Number	Type of Account
Loan Company)		(checking, savings, loan)

Please supply the following information about your charge accounts, contracts, or other financial liabilities:

Name of Firm	Address	Account Number

Within the last seven (7) years, have any of your bills ever be collection agency? YES NO If " YES ", please give when, firms involved and circumstances.	details to include
Within the last seven (7) years, have you ever had a purchase YES NO If "YES", please give details to include involved, and circumstances	le when, firms
Have you ever been delinquent on child support, income tax, YESNO If "YES", please give details to include why	* •

MOTOR VEHICLE OPERATION

Please list all vehicles registered to you and/or your spouse.

South Carolina Law requires that operators and owners of motor vehicles be covered by automobile liability insurance or pay an Uninsured Motorist Fee with the Department of Motor Vehicles. Therefore, please list the Current liability insurance coverage that you have on your motor vehicles.

Company Address Policy Number Expiration Date

nything you wish to disco	-	,	ı has not

LEGAL

If you have ever been detained, arrested, taken into physical custody, issued a misdemeanor citation (exclude traffic citations), or convicted of any crime, please give the following information. (The fact that your record may have been affected by a sealing, an expungement, a release, or a pardon has specific legal implications as to how you answer this question).

ATE	AGENCY/LOCATION	CHARGE	DISPOSITIO
stoppe	e list any other crimes you have ed, arrested, and/or convicted, t	o include what, when, w	
action	ou now or have you ever been in the state of the state of court and circumstances.	, please give details to i	nclude when, where
action	? YES NO If " YES "	, please give details to i	nclude when, where
action	? YESNO If "YES" of court and circumstances	, please give details to i	nclude when, where

Have you e	ver applie	d for a permit to carry a con	cealed firearm	or other wear	on?
YES	_ NO	Was a permit granted? _	Date Is	sued	
		ement Agency			
Purpose for	permit				
•		l hours of day, all days of the YES NO	e week, holida	ys, and	
human being, wo Do you have any	ould you ha personal f ne necessa	e course of your employment ave any reluctance to do so? feelings that would prevent ary? YES NO blease explain:	YESN you from takin	Ο	nother
Do you have any	thing in yo	our background that may dis	squalify you fr	om becoming	
a Law Enforcem "YES", please	ent Officer	r in the State of South Carol	ina? YES		_ If

DRUG USE QUESTIONNAIRE:

Have you used, tried, experimented, or in any way introduced into your body by any means:

DRUG	YES	NO	DATE FIRST	DATE LAST	USED
			USED	USED	ONCE
MARIJUANA					
HASHISH, HASHISH					
OIL					
COCAINE					
CRACK, ROCK, ICE					
Barbiturates, Hypnotics					
or "Downers"					
Amphetamines (Cross-					
tops, whites, Bennies,					
"Uppers"					
Methamphetamine					
(Speed ,Crank)					
LSD or other					
Hallucinogens					
PCP (angel dust,					
sherm)					
Heroin or other Opiates					

Steroids			
Pharmaceutical drugs not			
Prescribed to you			

DRUG USE QUESTIONNAIRE (Continued):

	YES	NO
QUESTIONNAIRE		
Is there any other illegal drug, narcotic or controlled substance not listed above that you have Introduced into your body?		
Have you introduced into your body a substance, which you thought, were an illegal drug and then found out that it was not?		
Have you ever injected an illegal drug into your body?		
Have you ever sold any illegal drugs?		
Have you ever purchased any drug, narcotic or controlled substance other than by a doctor's Prescription?		
Have you ever participated in the manufacturing, cultivation, or production of any illegal drug, Narcotic or controlled substance?		
Have you ever acted as a courier by transporting any illegal drug, narcotic, or controlled Substance?		
Have you ever acted as a middle man, go-between, or "done a favor for a friend" by becoming Involved in any illegal drug transaction?		
Have you ever told anyone where to purchase illegal drugs?		
Have you ever temporarily stored or "held" any illegal drug, narcotic, or controlled substance?		
Have you ever had illegal drugs in your possession while at work?		
Have you ever bought or sold any illegal drug at work?		
Are any illegal drugs presently in your home or car?		

"YES" answen, where, wh			

Have you ever stolen anything valued at more than \$10.00 from a place of employment? If yes, explain:

To your knowledge, have you ever been listed as a suspect, victim or contact person on a police report or incident report? If yes, explain:

Have you ever looked at child pornography via the internet, books or magazines? If yes, explain:

As an adult (over 17 years of age), have you ever had sexual contact with any person who was under the age of 16 at the time of the act? If yes, explain:

Have you ever exposed yourself in public? If yes, explain:

Have you committed any act involving hurting, harming, abusing, striking, or injuring any person?
If yes, explain:

Were you ever in a fight in which a weapon was used? If yes, explain:

Have you committed any act involving the intentional damage or destruction of any property belonging to another person? If yes, explain:

Have you ever stolen merchandise, property or cash from a business? If yes, explain:

Have you ever entered or remained on the property of another knowing you did not have permission to do so? If yes, explain:

Have you ever committed any act involving theft of a vehicle, use of a vehicle without the owner's consent or joyriding in a stolen vehicle? If yes, explain:

Have you committed any act involving stealing a credit card, presenting a credit card to obtain property or services fraudulently, using a credit card without the consent of the person to whom the credit card was issued, using an expired card, using a fictitious card or number, using a stolen credit card receipt or in any way attempting to commit theft or to steal from anyone by using a credit card? If yes, explain:

Have you committed any act involving fleeing from, running from, or evading by any means, including on foot or by vehicle, a police officer who is attempting to arrest, detain, or question you or any other person?

If yes, explain:

Have you committed any act involving disturbing the peace, including abusive, profane, or vulgar language, fighting in a public place or threatening another? If yes, explain:

Have you committed any act involving unlawful possession of a weapon, illegal weapons or ammunition, or explosive device? If yes, explain:

Have you ever stolen anything from a co-worker? If yes, explain:

Have you ever consumed alcohol at a place of employment? If yes, explain:

Have you ever purposely caused harm to another person? If yes, explain:

Have you ever hit, slapped, kicked or struck your spouse, girl/boyfriend? If yes, explain:

Have you ever physically struck a parent or stepparent? If yes, explain:
Have you ever committed a crime that police did not know about? If yes, explain:
Have you ever discharged a weapon either accidentally or on purpose that caused injury to yourself or others? If yes, explain:
Have you ever been involved as a suspect, victim, or contact person in a domestic abuse incident? If yes, explain:
When was the last time you wrote a check that bounced? Explain:
Have you ever physically abused or neglected a child? If yes, explain:
Have you ever lied in an official document? If yes, explain:
Have you ever taken anything that did not belong to you? If yes, explain:
What is the most serious thing you ever did as a child, whether you were caught or not?
What is the most serious thing you have ever done as an adult, whether you were caught or not?
Have you ever been evicted from a place of residence? If yes, explain:

Have you ever been sued or have you sued someone else? If yes, explain:

Have you ever filed bankruptcy? If yes, explain:

Do you pay child support?

If yes, to whom? How much?

Are your payments current?

If not, explain:

Do you drink alcoholic beverages of any kind?

Have you ever found money and, knowing whom it belonged to, kept it? If yes, explain:

Have you ever been accused of stealing? If yes, explain:

Do you have any tattoos that are visible when wearing a short sleeved shirt? If yes, describe:

Do you think that the tattoo(s) could be found to be objectionable by the public? If yes, explain:

OPTIONAL INFORMATION:

are	ist organizations, clubs, professional societies, or other associations of which ye, or have been a member (please include the name of the group, the city and std your present status or position in the group).
no	at are your personal hobbies? (What do you like to do during the times you are t at work?) Please include any special skills or qualifications that might be use the position for which you've applied.
_	
Lis	t the magazines and newspapers to which you currently subscribe.
Lis	t any identifying marks, scars, tattoos, burns or birthmarks.

*****COMPLETE ESSAY QUESTION ON THE NEXT PAGE*****

ESSAY:

Complete this page in your own handwriting.

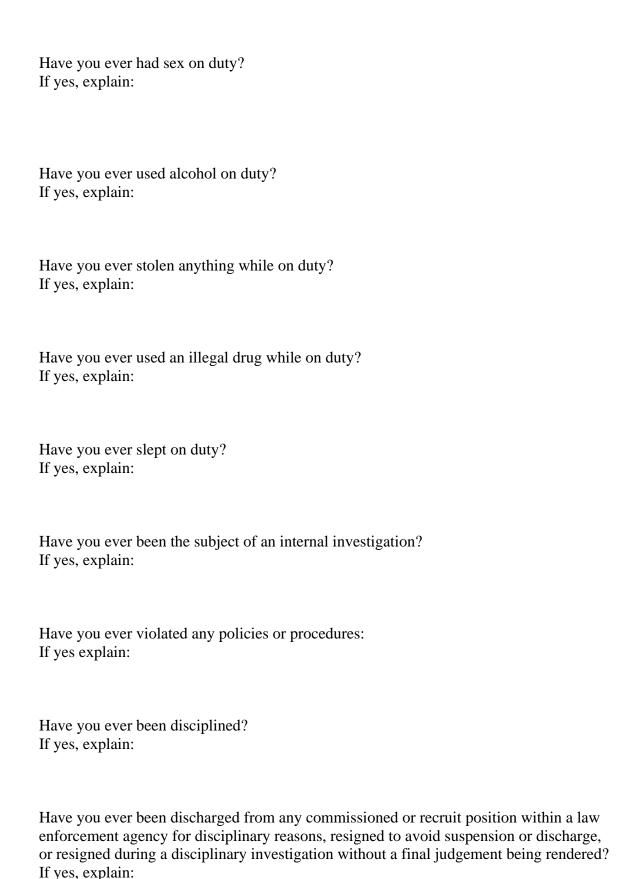
QUESTION: "Why do you want this job and how do you think it will benefit you?" (Limit essay answer to this page only)

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Attach a color photograph of yourself that is no more than three months old.

LAW ENFORCEMENT ADDITIONAL QUESTIONNAIRE

Have you ever deliberately handled evidence in an illegal manner? If yes, explain:
Have you ever falsified or altered an investigative report or document? If yes, explain:
Have you ever accepted anything in exchange for not issuing a traffic ticket or making an arrest? If yes, explain:
Have you ever lied under oath, in court, in an official report or on an application? If yes, explain:
While on duty as a law enforcement officer, have you ever witnessed other officers commit a crime and did not report it? If yes explain:
Since becoming a law enforcement officer, have you committed a crime? If yes, explain:
Have you ever used your position as a law enforcement officer to take sexual advantage of anyone? If yes, explain:
Have you ever been accused of sexual misconduct? If yes, explain:



Have you used marijuana or other illegal drugs since becoming a law enforcement officer? If yes, explain:
Have you ever informed anyone they were being investigated without authorization to do so? If yes, explain:
Have you ever stolen anything from an investigation site? If yes, explain:
Have you ever kept a "lost and found" item? If yes, explain:
Have you ever accepted a bribe or gratuity? If yes, explain:
Have you ever used excessive force? If yes, explain:
Have you ever observed a fellow officer use excessive force and fail to report it? If yes, explain:
Has anyone ever filed a lawsuit or complaint against you for using excessive force? If yes, explain:
Have you ever kept evidence or contraband and converted it to your personal use? If yes, explain:

Have you ever concealed or failed to report a crime, misconduct or improper behavior of any civilian? If yes, explain:
Have you ever done anything you could have been suspended for had your supervisor been aware? If yes, explain:
Have you ever furnished drugs or other contraband to a prisoner or inmate? If yes, explain:
Have you ever divulged the identity of an undercover law enforcement officer to an unauthorized person? If yes, explain:
Have you ever divulged the identity of a confidential informant to an unauthorized person? If yes, explain:
Have you ever accepted a gift as a law enforcement officer? If yes, explain:
Have you ever stolen anything from a prisoner or inmate? If yes, explain:
Have you ever "planted" evidence or otherwise "framed" someone? If yes, explain:
Have you ever "fixed" or attempted to "fix" a traffic ticket for anyone? If yes, explain:
How many times have you provided confidential information to an unauthorized person?

Corrections Officer Additional Questionnaire

Have you ever accepted a bribe or gratuity? If yes, explain:
Have you ever taken (stolen) from a prisoner or their personal effects? If yes, explain:
How many times have you kept contraband and converted it to your personal use?
How many times have you used excessive force in controlling inmates?
What have you done that you could have been suspended for, had your supervisor known?
What is the most expensive gift you have ever received as a corrections officer?
Were you ever suspended from a correctional agency? If yes, explain?
What is the most serious thing you have ever lied to a corrections supervisor about?
Have you ever unlawfully removed or destroyed correctional files or records? If yes, explain:
How many times have you provided confidential information to an unauthorized person?

Have you ever lied under oath? If yes, explain:
As a corrections officer, have you ever witnessed other officers commit a serious crime and failed to report it? If yes, explain:
Have you ever had sexual contact with an inmate? If yes, explain:
Since becoming a corrections officer, have you committed a crime? If yes, explain:
As a corrections officer, have you ever allowed unauthorized privileges in exchange for sexual favors? If yes, explain: